## PART B - FEE(S) TRANSMITTAL **Q7/06-6** omplete and stad this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 JUL 1 4 2006 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885 INSTRUCTIONS: Form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate the transmitting the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 04/17/2006 7812 7590 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. SMITH-HILL AND BEDELL, P.C. 16100 NW CORNELL ROAD, SUITE 220 BEAVERTON, OR 97006 Penelope Stockwell (Depositor's name) 07/17/2006 MAHMED2 00000008 09535676 (Signature 1400.00 DP 01 FC:1501 **2**006 3.00 OP 11, (Date) 02 FC:8001 FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE 7049 US 2181 03/23/2000 Mayer D. Schwartz 09/535,676 TITLE OF INVENTION: DEMULTIPLEXING A STATISTICALLY MULTIPLEXED MPEG TRANSPORT STREAM INTO CBR SINGLE PROGRAM TRANSPORT STREAMS DATE DUE APPLN, TYPE SMALL ENTITY ISSUE FEE **PUBLICATION FEE** TOTAL FEE(S) DUE 07/17/2006 \$1400 \$0 \$1400 NO nonprovisional ART UNIT **CLASS-SUBCLASS EXAMINER** 2616 3,70-395000 FERRIS, DERRICK W 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, <sub>2</sub>Smith-Hill and Bedell, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE TUT SYSTEMS, INC. Lake Oswego, Oregon

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

John Smith-Hill

Typed or printed name

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Please check the appropriate a	ssignee category or categories (will not b	be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🚨	Government
4a. The following fee(s) are en	nclosed:	4b. Payment of Fee(s):	
⅓ Issue Fee		A check in the amount of the fee(s) is enclosed.	
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5. Change in Entity Status (f	from status indicated above)		
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.		b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	
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